

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)**

SERIAL NO.  
**40584**  
APPLICANT(S)

FILING DATE  
**9-22-99**

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	NO.	DEF.	NO.	DEF.	NO.	DEF.
101						
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145						
146						
147						
148						
149						
150						
TOTAL NO.			24			
TOTAL DEF.			59			

	NO.	DEF.	NO.	DEF.	NO.	DEF.
61						
62						
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69						
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98						
99						
100						
TOTAL NO.						
TOTAL DEF.						

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)**

SERIAL NO.

461584

FILING DATE

9-22-79

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
5						
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TOTAL IND.	4		24			
TOTAL DEP.	25					

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
61						
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.			24			
TOTAL DEP.			50			